PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

KINGOUSA

		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		17
TOTAL CLAIMS			12					RATE	FEE		RATE	FEE	/
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	1
TOTAL CHARGEABLE CLAIMS			/ 2 minus 20=					X\$ 9=		OR	X\$18=		6
INDEPENDENT CLAIMS			/ minus 3 =		•			X42=		'	X84=		
	LTIPLE DEPENI		RESENT							OR			
			lass than se		. "O" in a	odumo 2	j	+140=		OR	+280=	= (50)	K
* (1			less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						١	SMALL I	ENTITY	OR	OTHER SMALL		ľ	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
	Total	. 1	Minus	-0	0	= /	1	X\$ 9=		OR	X\$18=	/	
	Independent		Minus	***	3	= /]	X42=	1	OR	X84=		1
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	F-EEAIM	(🗆	J	+140#		OR	+280= /	/	1
								TØTAL		OR	TOTAL		1
		(Cal		(Calu	mn 3)	(Column 3	11	ADDIT FEE		JON	ADDIT. FEE		1
<u> </u>		(Column 1) CLAIMS		HIGH	mn 2)		ή .		ADDI-	1		ADDI-	1
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	4	XS 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	4	X42=		OR	X84=		ı
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM			+140=		OR	+280=		1
								TOTAL		OR	TOTAL		1
		(Column 1)		(Colu	ımn 2)	(Column 3	3)	ADDIT. FEE	L	•	ADDIT. FEE		1
၁		CLAIMS		HIG	HEST		٦		ADDI-	1		ADDI-	┪
Ę		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	-
AMENDMENT	Total	*	Minus	**	7 1 011	=	1	X\$ 9=	<u> </u>	OR	X\$18=		1
VEN	Independent	*	Minus	***		=	1	<u> </u>		į	V04		┨
P	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR		 	┨
	+140=									OR	L	<u> </u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		4
	The Highest Nur	mber Previously P	aid For" (Total	or Indepen	dent) is th	ie highest num	ber f	ound in the ap	propriate bo	ox in c	olumn 1.		